

09/869091

Solo

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

09/1869091

FILING DATE

APPLICANT(S)

CLAIMS

Table with columns for AS FILED, AFTER 1st AMENDMENT, AFTER 2nd AMENDMENT, and CLAIMS (1-100). Includes sub-columns for IND. and DEP. and summary rows for TOTAL IND., TOTAL DEP., and TOTAL CLAIMS.

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Best Available Copy